

Please type a plus sign (+) inside this box



Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>CHANGE OF CORRESPONDENCE ADDRESS</b> <i>Application</i> Address to: Assistant Commissioner for Patents Washington, D.C. 20231	<b>Application Number</b>	09/880,827
	<b>Filing Date</b>	June 14, 2001
	<b>First Named Inventor</b>	Chow et al.
	<b>Group Art Unit</b>	Unassigned
	<b>Examiner Name</b>	Unassigned
	<b>Attorney Docket Number</b>	03493.82509

**RECEIVED**  
**JAN 07 2002**  
**Technology Center 2600**

**JAN 04 2002**  
**U.S. PATENT & TRADEMARK OFFICE**

Please change the Correspondence Address for the above-identified application to:



Customer Number

22907

Type Customer Number here

Place Customer  
Number Bar Code  
Label here

OR



Firm or  
Individual Name

Thomas H. Jackson, Esq.

**Address**

Banner & Witcoff, Ltd.

**Address**

1001 G Street, N.W.

**City**

Washington

**State**

**DC**

**ZIP**

20001

**Country**

USA

**Telephone**

(202) 508-9100

**Fax**

(202) 508-9299

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :



Applicant.



Assignee of record of the entire interest.  
Certificate under 37 CFR 3.73(b) is enclosed.



Attorney or agent of record.



Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

**Typed or  
Printed Name**

Catherine A. Ferguson, Reg. No. 40,877

**Signature**

*Catherine A. Ferguson*

**Date**

January 4, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.



\*Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.